

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	S/1/PCT	601	25
O.I.P.E. CLASSIFIER	SN	100	5/16
FORMALITY REVIEW			06/13/01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	Original
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
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9/8/01 by  
and/or

If more than 150 claims or 10 actions  
staple additional sheet here

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Claim	Date
Final	Original
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